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**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

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May 31, 2007

TO: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Yvonne B. Burke
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: J. Tyler McCauley *for*
Auditor-Controller

SUBJECT: **DEPARTMENT OF JUSTICE SETTLEMENT AGREEMENT –
APRIL 2007 MONITORING RESULTS**

As requested, attached are the results of the Auditor-Controller (A-C) monitoring review of the County's juvenile halls for April 2007. The monitoring reviews are used to measure Los Angeles County's (County) progress in implementing the 52 recommendations (referred to as paragraphs) contained in the Department of Justice (DOJ) settlement agreement. The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the DOJ.

Background

In December 2004, the A-C assumed oversight responsibility of the Quality Assurance Unit (QA Unit) as directed by your Board. The QA Unit was established to conduct on-going monitoring of the County's progress implementing the paragraphs contained in the DOJ settlement agreement. The QA Unit consists of staff from the A-C, Probation Department (Probation), the Department of Mental Health (DMH), and Juvenile Court Health Services (JCHS). The QA Unit works and consults with the DOJ monitors regularly. The DOJ monitors are a group of subject matter experts designated by the DOJ to assess the County and the Los Angeles County Department of Education's (LACOE) progress to implement the 52 paragraphs.

LACOE has been designated as the lead agency for five of the 52 paragraphs and monitors their own progress implementing these paragraphs. LACOE reports are

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submitted to the A-C and DOJ monitors monthly. The status of each of LACOE's paragraphs begins on page 11 of Attachment 2 of this report.

Implementation Status Summary

The compliance rate noted below for each paragraph is based on our testwork, discussions with the DOJ monitors and the compliance rates for overlapping paragraphs. For example, use of force includes paragraphs 18, 28, 29, and 32.

As of May 1, 2007, 20 of the 52 paragraphs have been fully implemented. Since January 2007, the DOJ began formal monitoring on nine paragraphs (10, 18, 22, 23, 24, 44, 52, 53, and 54). Before a paragraph is considered implemented, it must undergo formal monitoring by the DOJ monitors for one year. During the formal monitoring period, the DOJ monitors evaluate the County's compliance with the paragraphs' provisions. The DOJ will classify paragraphs as implemented if the County maintains substantial compliance with the paragraphs' provisions during the formal monitoring period.

For five of the remaining 23 paragraphs, LACOE staff monitor the implementation status. For the remaining 18 paragraphs, we noted the following:

- 2 paragraphs showed a 90% or above compliance rate.
- 6 paragraphs showed an 80% to 89% compliance rate.
- 8 paragraphs showed a 70% to 79% compliance rate.
- 2 paragraphs showed a less than 70% compliance rate.

Overall, the compliance rates for the 18 paragraphs did not significantly change from the compliance rates reported for March 2007 monitoring in our April 13, 2007 report. Attachment 1 contains a summary of the status of the 18 paragraphs not in formal monitoring. The details of our April 2007 monitoring review for the 18 paragraphs and the compliance rate for each are addressed in Attachment 2.

Implementation Status of Key Paragraphs

Based on discussions with the DOJ monitors, Probation and other members of the implementation team, in December 2006, we classified seven of the seventeen paragraphs as key paragraphs. The paragraphs focus on the County's need to improve the provision of essential mental health services to children assigned to the juvenile halls and a reduction in the level of violence. Four of the seven paragraphs (10, 18, 22 and 24) entered formal monitoring in February 2007. In March, we added Paragraph 31 to our listing of key paragraphs. Paragraph 31 involves child abuse investigations. We added the paragraph because of our concern in the lack of progress to implement the paragraph. The following are the remaining key paragraphs with a brief description and the current monitoring results.

Paragraph 27:

The County shall provide sufficient staff supervision to keep residents reasonably safe from harm and allow rehabilitative activities to occur successfully.

The State's standard for staffing is one staff per ten minors within the facility. Probation management has indicated they are committed to meeting the State's standard. Probation policy requires a staffing level of one staff to one minor for minors under Level III supervision.

During April 2007, the staffing levels within the 15 living quarters (non-Level III supervision) ranged from 3 to 15 minors to 1 Probation staff. In addition, the staffing levels for minors under Level III supervision at the three juvenile halls were one minor to one staff.

According to Probation, the County is on schedule to request formal monitoring by the target date.

Targeted Date to Request Formal Monitoring: August 2007

Paragraph 28:

The County shall develop and implement policies, procedures, and practices to restrict the use of oleoresin capsicum (OC) spray to appropriate circumstances, enable supervisors to maintain appropriate controls over spray use and storage, restrict the carrying of OC spray to only those individuals who need to carry and use it, prevent whenever possible the use of OC spray on populations for whom its use is contraindicated or contrary to doctors' instructions, and ensure that decontamination occurs properly.

Oleoresin capsicum, "pepper spray," is a pepper based non-lethal chemical restraint. Minors who are sprayed with OC spray are to be decontaminated by flushing the sprayed area with cold water. Probation developed policies governing the use of OC spray that conform to the above requirements.

During the month of March 2007, 14 separate incidents were reported in which staff used OC spray on minors. Six incidents occurred at Central Juvenile Hall, two incidents occurred at Los Padrinis Juvenile Hall and six incidents occurred at Barry J. Nidorf Juvenile Hall. According to the investigation reports, the use of OC spray in 12 of the 14 incidents was appropriate. In one of the remaining two incidents, the Probation staff did not use physical intervention prior to spraying the minor, as required. In the remaining incident the Probation staff used an excessive amount of the OC spray. In both incidents, the Probation staff were disciplined.

Twelve of the 14 youths received the appropriate medical attention within 30 minutes of being sprayed with OC. One minor received medical attention 45 minutes after being sprayed and one minor received medical attention two hours after being sprayed.

The County requested formal monitoring for this paragraph in February 2007. The DOJ has not responded to the County's request.

Paragraph 31:

The County shall develop and implement a system for the timely, thorough, and independent investigation of alleged child abuse.

Probation's Child Abuse Investigation Unit (Unit) consists of five full time and two part time investigators. The Unit rarely closes a case within the 30 day time frame as required. As of April 13, 2007, 24 of the 34 cases that were opened during February and March 2007 were still open. The Unit has a total of 47 open cases. Two of the 47 have been open for over 90 days.

We are continuing to experience difficulty in determining the date that the Unit's staff responded to reported child abuse incidents. The staff do not always record the date that they responded to allegations of child abuse.

Probation staff are required to maintain an activity log that lists when a Suspected Child Abuse Report (SCAR) was initiated and when the staff contacted law enforcement regarding the disposition of a criminal investigation. We were unable to determine if Probation appropriately contacted law enforcement for each SCAR. Of the 166 cases listed on the activity log, 127 cases did not list the dates that law enforcement personnel were contacted. Probation indicated that they plan to develop a policy to address this issue.

During the evaluation period, Probation identified an independent counsel to review the child abuse investigations completed by the Unit. The independent counsel's contract has been approved by the Board of Supervisors and is scheduled to begin in June 2007.

Targeted Date to Request Formal Monitoring: September 2007

Paragraph 32:

The County shall develop and implement a system for review of uses of force and alleged child abuse by senior management so that they may use the information gathered to improve training and supervision of staff, guide staff discipline, and/or make policy or programmatic changes as needed.

During the monitoring period, a total of 128 use of force incidents were reported in the three juvenile halls, 54 at Barry J. Nidorf Juvenile Hall, 31 at Los Padornos Juvenile Hall and 43 at Central Juvenile Hall. Of the 200 minors involved in the uses of force, 149 (75%) received medical treatment within 30 minutes of the use of force. Of the remaining 51 minors, 50 received medical treatment within two hours of the use of force. One minor received medical treatment five hours after the use of force due to his refusal to allow medical staff to treat him.

Probation supervisory staff did not always submit a completed use of force incident report to management within 48 hours of the incident as required. We reviewed the documentation packets for 128 incidents in use of force and noted 25 (20%) of the packets were not completed within the 48 hour reporting timeline established by Probation. Sixteen incidents were the result of two major disturbances at Barry J. Nidorf Juvenile Hall and required several interviews and additional follow-up investigation. The 16 reviews were completed from four to 35 days after the 48 hour timeline. The remaining nine reviews were completed from one to five days after the 48 hour reporting timeline.

Targeted Date to Request Formal Monitoring: May 2007

If you have any questions, please contact me or have your staff call Don Chadwick at (626) 293-1102.

Attachments

JTM:MO:DC

c: David E. Janssen, Chief Administrative Officer
 Robert B. Taylor, Chief Probation Officer
 Sachi A. Hamai, Executive Officer, Board of Supervisors
 Dr. Bruce Chernof, Director, Department of Health Services
 Dr. Marvin J. Southard, Director, Department of Mental Health
 Dr. Darline P. Robles, Superintendent, Los Angeles County Office of Education
 Justice Deputies
 Children Services Deputies
 Education Deputies
 Audit Committee

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT SUMMARY OF DOJ MONITORING RESULTS

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT AUDIT RESULTS		DEC 06	JAN 07	FEB 07	MARCH 07	APRIL 07	SUBSTANTIAL COMPLIANCE (1)
Paragraph 11	Treatment Planning	76%	74%	75%	74%	73%	80%
Paragraph 12	Implementation of the Treatment Plan	49%	47%	52%	48%	51%	85%
Paragraph 13 A	Counseling Services	50%	55%	69%	73%	76%	80% (2)
Paragraph 13 B	Counseling Services	50%	55%	50%	53%	83%	50% (2)
Paragraph 15	Individual Behavior Modification	70%	70%	70%	70%	70%	(3)
Paragraph 16	Substance Abuse	70%	70%	70%	70%	70%	Implementation of Contract Service Providers
Paragraph 25	Management of Suicidal Youth	80%	75%	75%	75%	80%	(3)
Paragraph 26	Care for Self-Harming Youth	85%	95%	90%	90%	90%	90%
Paragraph 27	Staffing	80%	80%	80%	80%	80%	(3)
Paragraph 28	Chemical Restraint	80%	80%	85%	85%	85%	90%
Paragraph 29	Use of Force	95%	95%	95%	95%	95%	95%
Paragraph 31	Child Abuse Investigations	50%	50%	50%	50%	55%	DOJ has not set a substantial compliance level
Paragraph 32	Use of Force Review	80%	80%	80%	85%	85%	90%
Paragraph 33	Rehabilitation and Behavior Management	70%	70%	70%	75%	75%	(3)
Paragraph 35	Reduce Youth on Youth Violence	80%	80%	80%	80%	78%	(3)
Paragraph 41	Medical Records Transfer	75%	75%	80%	80%	80%	(4)
Paragraph 45	Hygiene	70%	70%	75%	75%	75%	80%
Paragraph 46-50	LACOE	n/a	n/a	n/a	n/a	n/a	(5)
Paragraph 55	Youth Hygiene	70%	70%	70%	70%	70%	75%
Paragraph 56	System	85%	85%	85%	85%	85%	100%

Footnotes:

- (1) Substantial compliance is the level of compliance set by DOJ that the County must achieve for the paragraph to be granted formal monitoring.
- (2) Paragraph 13-A measures the adequacy of treatment; Paragraph 13-B measures improvement in the client's condition.
- (3) These paragraphs do not have an actual set percentage of substantial compliance. DOJ is monitoring these paragraphs by monitoring and observing the environmental change brought about by the reduction of use of force, reduction of youth on youth violence, appropriate management of suicidal youth and an environment free of fear and intimidation.
- (4) DOJ has indicated this paragraph will be in substantial compliance when a program for an electronic medical record (EMR) has been identified, funding for the EMR has been appropriated and an implementation plan with an implementation date has been developed.
- (5) Paragraphs 46-50 are monitored by LACOE and are outside the scope of this report. LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs. LACOE management stated they have been working closely with the DOJ monitors and have reached a mutual understanding of the definition of substantial compliance. The DOJ monitors will provide details of LACOE's progress toward substantial compliance in their upcoming semi-annual report. LACOE management further stated that the primary DOJ monitor for Paragraph 50 has indicated he will grant formal monitoring to Paragraph 50 in June 2007.

**QUALITY ASSURANCE UNIT
MONTHLY MONITORING RESULTS
FOR APRIL 2007**

Scope of Review

The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the Department of Justice (DOJ). As of May 1, 2007, 20 of the 52 paragraphs have been fully implemented. In addition, since January 2007, the DOJ began formal monitoring of nine paragraphs (10, 18, 22, 23, 24, 44, 52, 53 and 54). For five of the remaining 23 paragraphs, LACOE staff monitor the implementation status. Our monitoring review covered the remaining 18 paragraphs.

The compliance rate that we identified for each paragraph is based on our testwork, discussions with the DOJ monitors and compliance rate for the overlapping paragraphs. For example, use of force includes paragraphs 18, 28, 29 and 32.

PARAGRAPH 11: Treatment Planning

The County shall develop and implement policies and procedures, and practices for interdisciplinary treatment planning for youth with serious mental health needs, which allow for the ongoing identification, goal setting, and monitoring of youths' target symptoms. As permitted by law, a representative of LACOE shall share information with regard to the youth's academic performance and school-related behaviors, and shall also be responsible for sharing needed information from the treatment planning process with education professionals serving those youth.

Current Compliance Rate: 73%

Comments:

Based on documentation maintained by Probation staff, it appeared that DMH services were provided to the minors. However, DMH's and the mental health contractors' records lack adequate documentation to support the services. These findings have been noted in prior monitoring reviews and discussed with DMH management. DMH management met with the contracted agencies' executive directors to reinforce the need for staff to maintain documentation to support the services provided.

In January 2007, DMH management hired three quality integrity (QI) staff to develop training for DMH personnel to ensure DMH complies with the DOJ standards. During the monitoring period, the QI staff attended our exit meetings with DMH management and participated in the discussions of audit findings. The QI staff also provided some training to the DMH staff to correct the discrepancies noted in our monitoring reviews.

PARAGRAPH 12: Implementation of the Treatment Plan

The County shall develop and implement policies, procedures, and practices for case management, which would allow for the implementation of the treatment plans and ensure that treatment planning follows each youth from facility to facility.

Current Compliance Rate: 51%

Comments:

DMH staff did not always sufficiently document the minors' target symptoms and the problems that need to be addressed during the treatment session. DMH staff also did not always sufficiently document changes in the minors' targeted symptoms since the minors' last treatment sessions as required. In addition, the staff did not always document efforts to contact the parents/guardians when the initial attempt to contact them fails. These issues have been noted in prior monitoring reports and discussed with DMH management. In March 2007, DMH developed a more precise criterion for situations when the youth decline to have their families contacted or when the parents' phone is disconnected.

PARAGRAPH 13: Counseling Services

The County shall develop and implement policies, procedures and practices to ensure the availability of sufficient and adequate counseling services that meet the goal of ameliorating target symptoms of identified mental illness.

Current Compliance Rate: A. Screen 1 - 76%, B. Screen 2 - 83%

Comments:

The Brief Symptom Inventory (BSI) is a standardized instrument that reflects subjective distress. The initial BSI is administered to a minor upon admission. A second BSI is administered three weeks after the minor's admission to determine if there has been any improvement in the clients' symptoms.

During February 2007, the DOJ set the compliance level for Paragraph 13 A (Screen 1) at 80%. During DOJ's last visit in March 2007, they agreed to set the compliance level for Paragraph 13 B (Screen 2) to 50%.

Screen 1 measures the adequacy of DMH staff's treatment contacts to the minor. Screen 2 measures improvements in the clients' symptoms when the results of the second BSI are compared to the first BSI.

During our April 2007 monitoring visit, we reviewed the documentation contained in 30 case files and noted the following:

- 12 cases were rated at 100%
- 4 cases were between 80% and 90%
- 7 cases were rated between 60% and 70%
- 7 cases were rated at less than 70%

The case ratings were based on the level of documentation to identify the services provided to the minors. Case files rated at less than 100% did not maintain sufficient documentation of the services that DMH staff provided or their contacts with the minors.

During our April 2007 review of Screen 2, 25 of the 30 cases (83%) reviewed showed improvement when the second BSI was compared to the first BSI.

PARAGRAPH 15: Individualized Behavior Modification

The County shall develop and implement individualized behavior modification programs for individual youth where appropriate. If warranted, LACOE will develop and implement Behavior Support Plans which will be incorporated into youths' Individual Learning Plans. If a special education pupil requires a Behavior Support Plan or Behavior Intervention Plan, the IEP team shall include this need in the IEP.

Current Compliance Rate: 70%

Comments:

The DOJ monitor and DMH have not developed a specific audit tool for this paragraph. The DOJ monitor and DMH believe that the Individualized Behavior Modification Planning (IBMP) process outlined in Paragraph 33 addresses the minors' needs related to this paragraph. The DOJ monitor stated that the type of intervention addressed in this paragraph is rare. DMH management stated that this paragraph does not lend itself to regular sampling and auditing. Probation and DMH have established a process for youth whose needs cannot be met through the IBMP process to be identified for consideration for an Individualized Behavior Modification Plan. In the event that youth have needs that cannot be met through the IBMP process, the IBMP committee will refer the youth for consideration by the Enhanced Supervision Unit (ESU) and for the Collaboration, Assessment, Rehabilitation and Evaluation (CARE) Units as appropriate. If none of these options meet the needs of the youth, an individual behavior modification program will be developed by Probation and DMH specifically for the needs of the youth. In addition, the opening of the boys' and girls' ESUs provides an alternative treatment environment to meet the minors' needs.

PARAGRAPH 16: Substance Abuse

The County shall develop and implement policies, procedures, and practices to address substance use disorders appropriately.

Current Compliance Rate: 70%

Comments:

The compliance rate is based on our assessment of the initial screening process, the drug education program, and the follow up process. Generally, the screening process is sufficient. However, the County needs to improve the drug education/drug awareness and follow up process. For example, on a voluntary basis, Atlantic Recovery, Tarzana Treatment and Narcotics Anonymous are providing treatment and counseling to the minors at the three juvenile halls. However, due to a lack of a contract, the service providers cannot provide level of service the minors require.

Probation has been working with DMH to utilize existing DMH contractors to provide substance abuse services at the three juvenile halls. The DMH contractors will provide services beginning July 2007,

PARAGRAPH 25: Management of Suicidal Youth

The County and LACOE shall develop and implement policies, procedures, and practices to ensure that mental health staff are sufficiently involved with probation and education staff in the management of youth exhibiting suicidal behaviors, including creation of individual behavior modification programs (County) and, if needed, creation for a youth of a Behavior Support Plan or a Behavior Intervention Plan (LACOE), and decisions about appropriate clothing, bedding, and housing (County).

Current Compliance Rate: 80%

Comments:

Probation staff provide adequate supervision of youth placed on Level III supervision. The Individual Behavior Management Plan (IBMP) committees reviewed and classified all the self-harm incidents that occurred during the period of our review. Probation issued a policy requiring building supervisors to promptly review and evaluate attempted suicides that occurred in their units. The policy also requires a tracking system that assigns a unique identifier to each incident to ensure that the incidents are properly reported and filed in a centralized location.

Each minor placed on Level III supervision must have an Enhanced Supervision Observation (ESO) form initiated for each shift and maintained during their assignment to Level III supervision status. Probation staff shall make entries on the form at four-hour intervals documenting the staff's observations of the minor's behavior.

During our April 2007 review, we reviewed the files of 27 minors on Level III supervision at the three juvenile halls. The files were missing 69 (11%) of the required 604 Enhanced Supervision Observation Forms (form). The following is the breakdown of the missing forms by juvenile hall:

- 34 of 276 sampled at Central Juvenile Hall.
- 33 of 209 sampled at Barry J. Nidorf Juvenile Hall.
- 2 of 119 sampled at Los Padrinis Juvenile Hall.

PARAGRAPH 26: Care for Self – Harming Youth

The County shall develop a continuum of services and responses to meet the needs of self-harming youth, including revised supervision practices to minimize incidents of self-harm and appropriate access to hospital services and specialized residential facilities.

Current Compliance Rate: 90%

Comments:

Each juvenile hall must maintain a Mental Health Psychiatric Hospital log, indicating minors requiring transfer to a higher level of care and a Transportation log documenting minors transferred to a higher level of care. We reviewed the Mental Health Psychiatric Hospital log and the Transportation log at each juvenile hall and noted they were current and accurate.

PARAGRAPH 27: Staffing

The County shall provide sufficient staff supervision to keep residents reasonably safe from harm and allow rehabilitative activities to occur successfully.

Current Compliance Rate: 80%

Comments:

The State's standard for staffing is one staff per ten minors within the facility. Probation management has indicated they are committed to meeting the State's standard. Probation policy requires a staffing level of one staff to one minor for minors under Level III supervision.

During April 2007, the staffing levels within the 15 living quarters (non-Level III supervision) ranged from 3 to 15 minors to 1 Probation staff. In addition, the staffing levels for minors under Level III supervision at the three juvenile halls were one minor to one staff.

PARAGRAPH 28: Chemical Restraint

The county shall develop and implement policies, procedures, and practices to restrict the use of oleoresin capsicum (OC) spray to appropriate circumstances, enable supervisors to maintain appropriate controls over spray use and storage, restrict the carrying of OC spray to only those individuals who need to carry and use it, prevent whenever possible the use of OC spray on populations for whom its use is contraindicated or contrary to doctors' instructions, and ensure that decontamination occurs properly.

Current Compliance Rate: 85%

Comments:

Oleoresin capsicum, "pepper spray," is a pepper based non-lethal chemical restraint. Minors who are sprayed with OC spray are to be decontaminated by flushing the sprayed area with cold water. Probation developed policies governing the use of OC spray that conform to the above requirements.

During the month of March 2007, 14 separate incidents were reported in which staff used OC spray on minors. Six incidents occurred at Central Juvenile Hall, two incidents occurred at Los Padrinos Juvenile Hall and six incidents occurred at Barry J. Nidorf Juvenile Hall. According to the investigation reports, the use of OC spray in 12 of the 14 incidents was appropriate. In one of the remaining two incidents, the Probation staff did not use physical intervention prior to spraying the minor, as required. In the remaining incident the Probation staff used an excessive amount of the OC spray. In both incidents, the Probation staff were disciplined.

Twelve of the 14 youths received the appropriate medical attention within 30 minutes of being sprayed with OC. One minor received medical attention 45 minutes after being sprayed and one minor received medical attention two hours after being sprayed.

PARAGRAPH 29: Use of Force

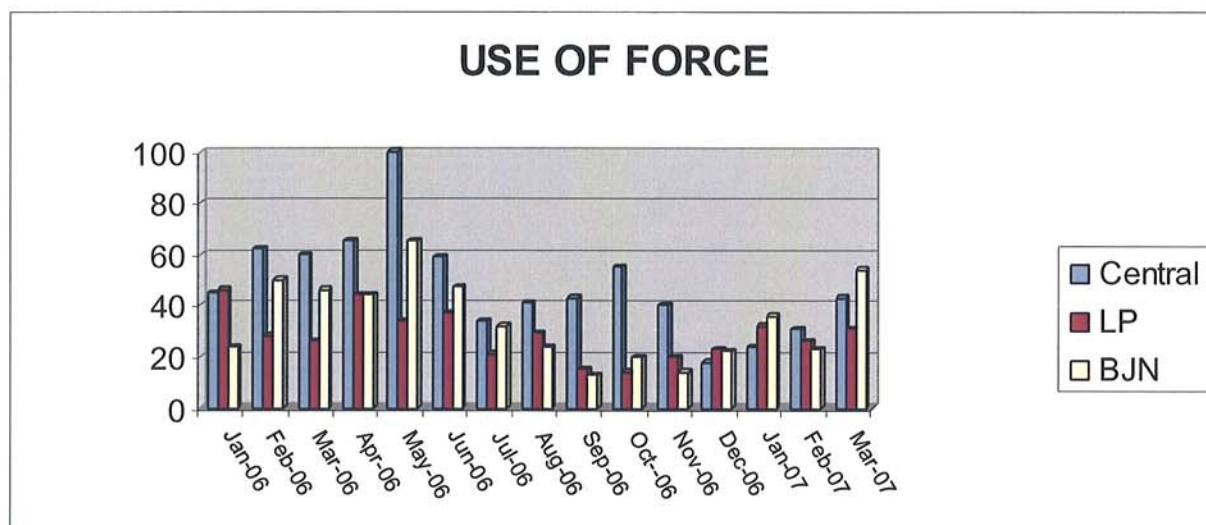
The County shall develop and implement a comprehensive policy and accompanying practices governing use of force, ensuring that the least amount of force necessary for the safety of staff, youth residents, and visitors is used on youth.

Current Compliance Rate: 95%

Comments:

The Probation Department trained its employees in "Safe Crisis Management," which emphasizes programming and de-escalation techniques. The training also included the proper use of physical and chemical restraints. Based on the number of reported incidents, it appears that overall the use of force has declined from last year, as depicted in the chart on the following page.

In the past, the DOJ monitor had stated that although Probation has implemented a use of force policy and training to comply with this paragraph, the DOJ monitor will not grant formal monitoring until the related Paragraphs 18, 28 and 32, are also ready for formal monitoring. In January 2007, the DOJ monitor indicated to the Project Manager that DOJ will consider formal monitoring for each paragraph on each paragraph's merit.

**PARAGRAPH 31: Child Abuse Investigation**

The County shall develop and implement a system for the timely, thorough, and independent investigation of alleged child abuse.

Current Compliance Rate: 55%

Comments:

Probation's Child Abuse Investigation Unit (Unit) consists of five full time and two part time investigators. The Unit rarely closes a case within the 30 day time frame as required. As of April 13, 2007, 24 of the 34 cases that were opened during February and March 2007 were still open. The Unit has a total of 47 open cases. Two of the 47 have been open for over 90 days.

During the evaluation period, we met with Probation to discuss reporting additional information on the log used to track reported child abuse incidents. Probation agreed to

require staff to report the date that they initially responded to reported incidents of alleged child abuse.

Probation staff are required to maintain an activity log that lists when a Suspected Child Abuse Report (SCAR) was initiated and when the staff contacted law enforcement regarding the disposition of a criminal investigation. We were unable to determine if Probation appropriately contacted law enforcement for each SCAR. Of the 166 cases listed on the activity log, 127 cases did not list the dates that law enforcement personnel were contacted. Probation indicated that they plan to develop a policy to address this issue.

Probation has identified an independent counsel to review the child abuse investigations completed by the Unit. The independent counsel's contract has been approved by the Board of Supervisors and is scheduled to start in June 2007.

PARAGRAPH 32: Use of Force Review

The County shall develop and implement a system for review of uses of force and alleged child abuse by senior management so that they may use the information gathered to improve training and supervision of staff, guide staff discipline, and/or make policy or programmatic changes as needed.

Current Compliance Rate: 85%

Comments:

During the monitoring period, a total of 128 use of force incidents were reported in the three juvenile halls, 54 at Barry J. Nidorf Juvenile Hall, 31 at Los Padinos Juvenile Hall and 43 at Central Juvenile Hall. Of the 200 minors involved in the uses of force, 149 (75%) received medical treatment within 30 minutes of the use of force. Of the remaining 51 minors, 50 received medical treatment within two hours of the use of force. One minor received medical treatment five hours after the use of force due to his refusal to allow medical staff to treat him.

Probation supervisory staff did not always submit a completed use of force incident report to management within 48 hours of the incident as required. We reviewed the documentation packets for 128 incidents in use of force and noted 25 (20%) of the packets were not completed within the 48 hour reporting timeline established by Probation. Sixteen incidents were the result of two major disturbances at Barry J. Nidorf Juvenile Hall and required several interviews and additional follow-up investigation. The 16 reviews were completed from four to 35 days after the 48 hour timeline. The remaining nine reviews were completed from one to five days after the 48 hour reporting timeline.

PARAGRAPH 33: Rehabilitation and Behavioral Management

The County shall provide adequate rehabilitative programming and gender-specific programming, where appropriate. The County and LACOE shall provide a facility-wide behavioral management system that is implemented throughout the day, including school time.

Current Compliance Rate: 75%

Comments:

Individual Behavior Management Plan (IBMP) and Interagency meetings are held weekly. As part of our April 2007 monitoring, we attended an IBMP meeting at Los Padornos Juvenile Hall to determine whether protocols and processes utilized at each facility are consistently applied. Committee members from LACOE, DMH, JCHS and Probation were present and participated in the discussions of the minors scheduled for review. Minutes to the meeting were taken and no problems were noted. We will continue to attend at least one meeting a month at one of the three juvenile halls.

On January 22, 2007, the Life Enhancement and Assessment of Personal Skills (LEAPS) program was implemented at all three juvenile halls. During our April review, we reviewed the documentation for ten LEAPS sessions at each of the three juvenile halls; all documentation was in order. According to the County's Project Manager, the only task remaining to bring this paragraph into compliance is the incentive/behavior management token economy system. The children's incentive stores are in place at all three halls. Once the points system is fully implemented, the paragraph will be ready for formalized monitoring. We will closely monitor the progress of LEAPS during our future reviews.

PARAGRAPH 35: Reduce Youth and Youth Violence

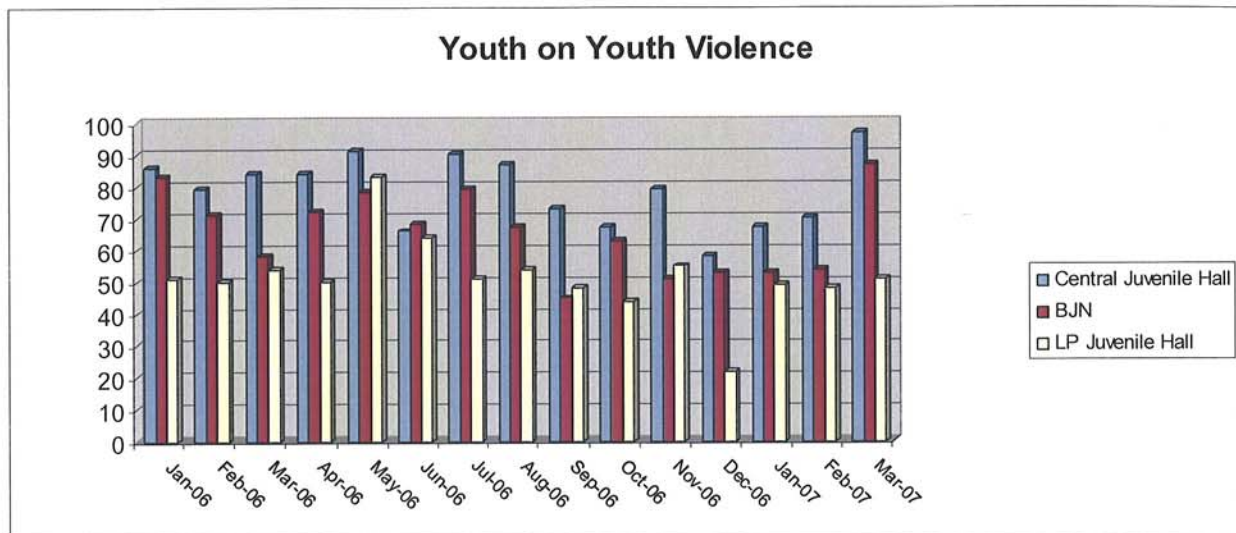
The County and LACOE shall develop and implement strategies for reducing youth on youth violence that includes training staff in appropriate behavior management, recognition and response to gang dynamics, and violence reduction techniques.

Current Compliance Rate: 78%

Comments:

Probation staff assigned to the juvenile halls received training in efforts to reduce youth on youth violence (YOYV). During the monitoring period, two major disturbances at BJNJH involving several minors occurred. As a result, the overall incidents of YOYV in the three juvenile halls increased by 63 incidents (27%), from 172 incidents in February 2007 to 235 incidents in March 2007. In addition, the March 2007 incidents represent a 17% increase compared to the 196 incidents reported in March 2006.

Overall, we noted a trend in the increase on YOYV since December 2006. We plan to work with Probation to identify the cause for the increase.



PARAGRAPH 41: Medical Records Transfer

The County shall develop and implement an effective system for transferring medical records from one facility to another so that youth receive timely and consistent medical services.

Current Compliance Rate: 80%

Comments:

Medical records are being transferred manually from one juvenile hall to another in a timely manner, and medical staff are documenting when medical records are sent and received. Probation and JCHS managers are meeting monthly to select an appropriate electronic medical record system that will meet the needs of JCHS staff. Probation and JCHS have not yet identified an electronic medical record system or a planned implementation date. However, Probation and JCHS are considering the Jail Health Information System (JHIS), a system used by the Los Angeles County Sheriff's Department at the County jails,.

On March 13, 2007, Probation and JCHS management met with representatives from the Sheriff's Department to attend a demonstration of JHIS. On March 28, 2007, Probation and JCHS management met with representatives from the Sheriff's Department to discuss the logistics of how JHIS could be implemented by Probation for use by JCHS. On April 20, 2007, Probation JCHS management and representatives from the Sheriff's Department participated in a conference call with the vendor who developed JHIS for the Sheriff's Department to discuss the conceptual design, cost and time line for adapting JHIS for Probation and JCHS's use. Probation's FY 07-08 budget included the funding for an electronic medical record system.

PARAGRAPH 45: Hygiene

The County shall ensure that medical and pharmaceutical areas are maintained hygienically, and shall establish an infection control program.

Current Compliance Rate: 75%

Comments:

We began using the revised audit tool that was approved by DOJ in January 2007. During our April 2007 monitoring review, we inspected the medical module at each juvenile hall. Overall, the sanitary conditions of the medical modules at the three juvenile halls have improved. However, Probation needs to improve the maintenance and cleanliness of the minors' restrooms and showers. For example, the showers at all three facilities had accumulated debris and dirt on the walls, in the corners and on the floors. At Barry J. Nidorf, the walls in the restrooms were visible dirty, and inspection with a fluorescent lamp revealed body fluids on the walls and backs of the toilets. These findings demonstrate inadequate cleaning and disinfection to control fungus and pathogens. Probation needs to closely monitor the quality of the services provided by the contracted vendors and intervene appropriately if the quality fails to meet the established standards.

In March 2007 Probation received approval from the Board of Supervisors to hire 18 custodians for the juvenile halls. Probation plans to use County custodial staff to provide custodial services at the juvenile halls to ensure the services are consistent and in compliance with the Juvenile Court Health Services Infection Control and Environment of Care Plans. Probation has not promulgated a list for the custodian item, so it is difficult to determine when the custodians will be hired and assigned to the juvenile halls.

During his April 2007 visit, the DOJ monitor assigned to Paragraph 45 indicated that he was pleased with the revised audit tool for Paragraph 45 and that he would probably grant formal monitoring to the paragraph during his next visit in August 2007.

PARAGRAPHS 46 to 50

Paragraphs 46 through 50 are audited by LACOE's internal auditors under the supervision of LACOE management. On March 12, 2007, LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs as indicated below. LACOE management stated they have been working closely with the DOJ monitors and have reached a mutual understanding of the definition of substantial compliance. LACOE modified their audit tools to capture the information needed to document LACOE's progress toward substantial compliance. The DOJ monitors will provide details of LACOE's progress toward substantial compliance in their upcoming semi-annual report. LACOE management further stated

that the primary DOJ monitor for Paragraph 50 has indicated he will grant formal monitoring to Paragraph 50 in June 2007.

PARAGRAPH 46: Special Education

The County and LACOE shall develop and implement a systematic, comprehensive process to locate, screen, identify and provide appropriate services to all youth through age 21 with disabilities who require special education services.

Targeted Date to Request Formal Monitoring: August 2007

PARAGRAPH 47: Related Services

LACOE shall provide related services to special education students with needs for these services.

Targeted Date to Request Formal Monitoring: August 2007

PARAGRAPH 48: Parent Participation

The County and LACOE shall utilize a range of methods to facilitate parent participation in Individualized Educational Program (IEP) meetings.

Targeted Date to Request Formal Monitoring: April 2007

PARAGRAPH 49: Transition Planning and Services

The County and LACOE shall provide adequate transition planning and services for all eligible youth with disabilities.

Targeted Date to Request Formal Monitoring: June 2007

PARAGRAPH 50: Materials, Space and Equipment

The County and LACOE shall ensure that all classes, including those held inside residential units, have appropriate materials, space and equipment.

Targeted Date to Request Formal Monitoring: June 2007

PARAGRAPH 55: Youth Hygiene

The County and LACOE shall ensure that youth have adequate hygiene opportunities, including sanitary personal hygiene products. The county shall ensure that youth have adequate linens, bedding and clothing.

Current Compliance Rate: 70%

Comments:

Paragraph 55 is audited by Probation's Management Services Bureau (MSB) auditors. We review MSB's audit on a monthly basis. The percentage of compliance is based on the MSB auditors' reports and our discussions with the DOJ monitor.

We conducted walk-through inspections of the living quarters, supply rooms and laundry at all three juvenile halls. We interviewed Probation staff and inspected MSB's documentation related to inventories for clothing, hygiene items and cleaning supplies. The living quarters reviewed were in good condition, the supply rooms were adequately stocked and the laundries were clean. MSB's documentation at Los Padrinos and Central Juvenile Halls were in order. The bi-monthly sanitation log, the monthly critical supply inventory and the critical supply audit were missing at Barry J. Nidorf Juvenile Hall. We reported the lack of documentation to Probation management and the DOJ Project Manager.

Paragraph 56: System

The County and LACOE shall revise and/or institute quality assurance systems to ensure implementation of the provisions addressed in this Agreement.

Current Compliance Rate: 85%

Comments:

The County has established a quality assurance program for the three juvenile halls. Data is being gathered in a variety of areas. The Quality Assurance Unit is now completing periodic compliance audits at the juvenile halls and issuing monthly status reports to the Board of Supervisors.